

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

New Millennium PAC

ADDRESS (number and street)

P.O. Box 632

☐Check if different
than previously
reported. (ACC)

Union City

NJ

07087

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00349233

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☒July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

17

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Abraham Antun

Signature of Treasurer

Electronically Filed by Abraham Antun

Date

07

15

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
New Millennium PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	1	7	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		198653.08
(b) Cash on Hand at Beginning of Reporting Period	266853.38	
(c) Total Receipts (from Line 19)	36047.07	164517.26
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	302900.45	363170.34
7. Total Disbursements (from Line 31)	35619.47	95889.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	267280.98	267280.98
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
New Millennium PAC

Report Covering the Period:

From:

M M D D Y Y W Y
0 4 1 7 2 0 0 8

To:

M M D D Y Y W Y
0 6 3 0 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	35900.00	134200.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	35900.00	134200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	30000.00
(c) Other Political Committees (such as PACs)	0.00	164200.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	147.07	317.26
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36047.07	164517.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36047.07	164517.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	13119.47	36889.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	13119.47	36889.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	59000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35619.47	95889.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35619.47	95889.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	35900.00	164200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35900.00	164200.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13119.47	36889.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13119.47	36889.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Raul Alarcon

Mailing Address 1001 Ponce De Leon Blvd.

City

Coral Gables

State

FL

Zip Code

33134

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1721

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Raul Alarcon, Jr.

Mailing Address 2601 S. Bayshore Drive

City

Miami

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Spanish Broadcasting System

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1718

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Majorie Avant

Mailing Address 143 Pomona Avenue

City

Newark

State

NJ

Zip Code

07112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: C1710

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Frank Flores

Mailing Address 481 First Street

City

Oradell

State

NJ

Zip Code

07649

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1717

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Juan A. Garcia

Mailing Address 9001 SW 59th Ct.

City

Pinecrest

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sterling Advisors

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1723

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Cynthia Hudson-Fernandez

Mailing Address 9025 SW 59th Ct.

City

Miami

State

FL

Zip Code

33156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Spanish Broadcasting System

Occupation

Exec. VP/Chief Creative Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1722

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Mattie James

Mailing Address 49 12th Avenue
Apt. #2

City State Zip Code
Newark NJ 07103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Essex Plaza Management

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: C1707

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Thomas Johansen

Mailing Address 2601 Bayshore Drive, 5th Floor

City State Zip Code
Miami FL

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mega TV

Occupation
General Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1720

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Jane Pagano

Mailing Address 37 Warwick Rd

City State Zip Code
Colonia NJ 07067-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 0 8

Transaction ID: C1708

Amount of Each Receipt this Period

800.00

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Panepinto

Mailing Address Harborside Plaza 10
3 Second Street, Suite 1203

City State Zip Code
Jersey City NJ 07311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Panepinto Properties

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: C1709

Amount of Each Receipt this Period

800.00

B.

Full Name (Last, First, Middle Initial)

Marko Radlovic

Mailing Address 14244 Greenleaf Street

City State Zip Code
Sherman Oaks CA 91423

FEC ID number of contributing
federal political committee.

C

Name of Employer
Spanish Broadcasting System

Occupation
COO/Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1719

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Costantino Specht Templeton and Co LLC

Mailing Address 110 Meadowlands Pkwy.
Suite 303

City State Zip Code
Secaucus NJ 07094

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 7 / 2 0 0 8

Transaction ID: C1715

Amount of Each Receipt this Period

400.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

3200.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Nicholas Costantino

Mailing Address 110 Meadowlands Pkwy.
Suite 303City State Zip Code
Secaucus NJ 07094FEC ID number of contributing
federal political committee.**C**Name of Employer
Costantino Specht Templet-
on and CoOccupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	0	8

Transaction ID: C1716

Amount of Each Receipt this Period

400.00

[MEMO ITEM]**B.**

Full Name (Last, First, Middle Initial)

Jersey Parking LLC

Mailing Address 28 Clinton Street

City State Zip Code
Newark NJ 07102FEC ID number of contributing
federal political committee.**C**Name of Employer
PartnershipOccupation
N/A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	8

Transaction ID: C1713

Amount of Each Receipt this Period

5000.00

PARTNERSHIP--partners bel-
ow if itemized**C.**

Full Name (Last, First, Middle Initial)

Jason Kimmel

Mailing Address 305 Glen Avenue

City State Zip Code
Short Hills NJ 07030FEC ID number of contributing
federal political committee.**C**Name of Employer
Jersey Parking LLCOccupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	8

Transaction ID: C1714

Amount of Each Receipt this Period

5000.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Morris Realty LP

Mailing Address 350 Veterans Blvd.

City

Rutherford

State

NJ

Zip Code

07070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Partnership

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: C1711

Amount of Each Receipt this Period

2900.00

PARTNERSHIP--partners below if itemized

B.

Full Name (Last, First, Middle Initial)

Joseph Morris

Mailing Address 350 Veterans Blvd

City

Rutherford

State

NJ

Zip Code

07070-2579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morris Realty LP

Occupation

Partner

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 7 / 2 0 0 8

Transaction ID: C1712

Amount of Each Receipt this Period

2900.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

35900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

New Millennium PAC

A.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: C1724

Amount of Each Receipt this Period

44.82

* Interest

B.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 0 / 2 0 0 8

Transaction ID: C1725

Amount of Each Receipt this Period

51.06

* Intrest

C.

Full Name (Last, First, Middle Initial)

Lakeland Bank

Mailing Address 250 Oak Ridge Road

City

Oak Ridge

State

NJ

Zip Code

07438

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: C1726

Amount of Each Receipt this Period

51.19

* Interest

SUBTOTAL of Receipts This Page (optional)

147.07

TOTAL This Period (last page this line number only)

147.07

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 20

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A.

Full Name (Last, First, Middle Initial)
1100 Valley Brook Ave. LLC

Mailing Address 1100 Valley Brook Ave.

City Lyndhurst State NJ Zip Code 07071

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2182

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1809.00

B.

Full Name (Last, First, Middle Initial)
1100 Valley Brook Ave. LLC

Mailing Address 1100 Valley Brook Ave.

City Lyndhurst State NJ Zip Code 07071

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

904.50

C.

Full Name (Last, First, Middle Initial)
Ceridian

Mailing Address PO Box 2021

City Pine Brook State NJ Zip Code 07058

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

490.60

SUBTOTAL of Disbursements This Page (optional)

3204.10

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021	Transaction ID: D2158 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>490.57</div>
B. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2181 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>82.90</div>
C. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2164 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>490.60</div>

SUBTOTAL of Disbursements This Page (optional)

1064.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021	Transaction ID: D2167 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 5 / 2 0 0 8</div> </div>
City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>490.56</div>
B. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2185 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 6 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>82.90</div>
C. Full Name (Last, First, Middle Initial) Ceridian Mailing Address PO Box 2021 City Pine Brook State NJ Zip Code 07058 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D2168 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 9 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>490.60</div>

SUBTOTAL of Disbursements This Page (optional)

1064.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: D2157 Date of Disbursement																				
Mailing Address 1831 Bay Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	8												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td>751.95</td> </tr> </table>	751.95																			
751.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Evans & Katz LLC	Transaction ID: D2161 Date of Disbursement																				
Mailing Address 1831 Bay Street SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	8												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Accounting Services Candidate Name	<table border="1"> <tr> <td>757.65</td> </tr> </table>	757.65																			
757.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2155 Date of Disbursement																				
Mailing Address 2602 Tremley Pt. Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	4		2	0	0	8												
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td>1187.11</td> </tr> </table>	1187.11																			
1187.11																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2696.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2159 Date of Disbursement
Mailing Address 2602 Tremley Pt. Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 8 / 2 0 0 8</div> </div>
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>1187.13</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2165 Date of Disbursement
Mailing Address 2602 Tremley Pt. Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>1187.10</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2166 Date of Disbursement
Mailing Address 2602 Tremley Pt. Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 5 / 2 0 0 8</div> </div>
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period
Purpose of Disbursement Salary Candidate Name	<div> <div>1187.13</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3561.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Tiffani Llerandi	Transaction ID: D2169 Date of Disbursement																				
Mailing Address 2602 Tremley Pt. Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	9		2	0	0	8												
City Linden State NJ Zip Code 07036	Amount of Each Disbursement this Period																				
Purpose of Disbursement Salary Candidate Name	<table border="1"> <tr> <td colspan="10">1187.11</td> </tr> </table>	1187.11																			
1187.11																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D2173 Date of Disbursement																				
Mailing Address 1201 Third Avenue 40th Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		3	0		2	0	0	8												
City Seattle State WA Zip Code 98101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Legal Services Candidate Name	<table border="1"> <tr> <td colspan="10">33.00</td> </tr> </table>	33.00																			
33.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D2160 Date of Disbursement																				
Mailing Address P.O. Box 4890	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	8												
City Trenton State NJ Zip Code 08650	Amount of Each Disbursement this Period																				
Purpose of Disbursement Telephone Service Candidate Name	<table border="1"> <tr> <td colspan="10">255.16</td> </tr> </table>	255.16																			
255.16																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1475.27

TOTAL This Period (last page this line number only)

13065.57

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial) Alaskans for Begich Mailing Address PO BOX 240287	Transaction ID: D2174 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div>
City Anchorage State AK Zip Code 99524 Purpose of Disbursement Contribution Candidate Name Mark Begich Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AK District:	Amount of Each Disbursement this Period <div>5000.00</div>
B. Full Name (Last, First, Middle Initial) Friends of Bruce Lunsford Mailing Address 1500 Bardstown Road, Second Floor City Louisville State KY Zip Code 40205 Purpose of Disbursement Contribution Candidate Name Bruce Lunsford Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District:	Transaction ID: D2175 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>5000.00</div>
C. Full Name (Last, First, Middle Initial) FRIENDS OF JOE BACA Mailing Address 555 Capitol Mall Suite 1425 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Contribution Candidate Name Joe Baca Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 43	Transaction ID: D2162 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 4 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>2500.00</div>

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
New Millennium PAC

A. Full Name (Last, First, Middle Initial)
JEFF MERKLEY FOR OREGON

Mailing Address 921 SW WASHINGTON STE 470

City PORTLAND State OR Zip Code 97205

Purpose of Disbursement
Contribution

Candidate Name
Jeff Merkley

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District:

Transaction ID: D2176

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2008

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
Nebraskans for KleeB

Mailing Address 109 N. Hastings Avenue

City Hastings State NE Zip Code 68901

Purpose of Disbursement
Contribution

Candidate Name
Scott KleeB

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District:

Transaction ID: D2178

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2008

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
TIM JOHNSON FOR SOUTH DAKOTA INC

Mailing Address PO BOX 1536

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Contribution

Candidate Name
Tim Johnson

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: SD District:

Transaction ID: D2163

Date of Disbursement

M M / D D / Y Y Y Y
05 / 21 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

22500.00